License Type: 34 One Day Beer & Wine License Nontransferable

LICENSE NO. 9544027

Receipt No. Fee Paid

2525183 \$50.00

Geographical Code 1933

APPLICATION:

Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the above

ORGANIZATION:

HOLLYWOOD FOREVER INC-ENDOWMENT CARE & MEMORIAL CARE

LOCATION ADDRESS:

5970 SANTA MONICA BLVD LOS ANGELES, CA 90038

TYPE OF EVENT:

CONCERT

HR/DATES DURING WHICH ALCOHOL WILL BE SOLD:

September 20, 2018 8PM-11:30 PM

RECEIVE

DEC 21'2018

Alcoholic Beverage C Office of Legal Serv

ESTIMATED ATTENDANCE:

295

AUTHORIZED REPRESENTATIVE / ADDRESS

JAY BOILEAU

5970 SANTA MONICA BLVD LOS ANGELES, CA 90038

LICENSE:

The above-named organization is hereby licensed, pursuant to Section 24045.1 of the Business and Professions Code and Rule 59.5 of the California Code of Regulations, to engage in the temporary sale of alcoholic beverages for consumption at the above-named location for the period authorized below. This license does not include off-sale ("to-go") privileges. This license may be revoked summarily by the Department if, in the opinion of the Department and/or the local law enforcement agency, it is necessary to protect the safety, welfare, health, peace, and morals of the people of the State.

Good for 1 day(s). Date Issued September 17, 2018.

Director of Alcoholic Beverage Control

State of California Edmund G. Brown Jr., Governor

Instructions: Complete all items. Submit to local ABC District Office with required fee (Cashier's Check or Offices please visit http://www.abc.ca.gov/distmap.html						Edmund G. Brown Jr., Govern		
						LICENSE NUMBER	GEO CODE	
Pursuant to the au license(s) describe	uthority granted h	y the organizatio	mi n named below, the unders	igned hereby applies for t	he	RECEIPT NUMBER		
						FEE		
1. ORGANIZATION'S NAME Hollywood Forever Inc Endowment Care & Memorial Care CONDITIONS REQUIRED Yes No						\$		
Hollywood Fore	ver Inc Endo	wment Care &	Memorial Care	CONDITIONS REQUIRED Yes	No	DIAGRAM REQUIRED		
2. LICENSE TYP	E (Check appro	opriate license	type AND organization t	uno)	1100	Yes	No	
a Daily Gene	eral (\$25.00)	(Includes b	eer, wine and distilled s	ype)	-			
Political Public O	Party/Affiliate S ffice or Ballot M	Upporting Cana	lidate for	Fraternal Organ	nization in E	Existence Over	Five Years	
Organization Formed for Specific Charitath and a second with Regul					embership			
Other:	Other:					ion		
				Vessel per Sect	tion 24045.	10 B&P (\$50 or))	
					and the same of th	NUMBER OF DISPEN	SING POINTS	
b. Special Da	ily Beer (\$25.0	0)						
Charitabl			Special Daily Be	er & Wine (\$50.00)		Special Da	ily Wine (\$25.00)	
1.77			Political	Other:		C	(020.00)	
Civic	Religious	Cultura Cultura	Amateur Sports	S Organization	ĺ	NUMBER OF DISPENS	SING POINTS	
						1		
	mporary Licens		(Different privile	eges depending on stat	tutol			
Television	n Station per Se	ection 24045.2	or 24045.9 B&P					
Nonprofit	Corporation pe	r Sections 2404	45.4 and 24045.6 B&P	Person conducting	g Estate Win	e Sale per Sectio	n 24045.8 B&P	
				Women's Educa	tional and	Charitable Orga	nization per	
Other Spec	ial Temporary	Licenses, per	Section	Section 24045.3	B&P			
License nun	nber		Amount	•			*	
3. EVENT TYPE			Amount	Φ				
Dinner	Dance	Wedding	Lunch Picnic	Barbeque	Social G			
Sports Event	Concert	Birthday	Mixer Carniva	_		athering *	Festival	
4. TOTAL # OF DAYS	5. ESTIMATED ATT	TENDANCE	6. HOURS OF ALCOHOLIC BEV	The state of the s	Other:	- Y		
1	295		From 8:00pm	VERNOE SALES, SERVICE AND/		Bloo Alla		
7. EVENT DATE(S)	2040		and a second second second	8. EVENT IS OPEN TO THE F	То	11:30pm 4/6	2	
Thursday 09.20.2	2018	-		Yes	No	- Alconom	12	
9. EVENT LOCATION (Give	odgo 507	treet number and name	e, and city)			AMero	2010	
10. LOCATION IS WITHIN	THE CITY LIMITS	11. TYPE OF ENTER	onica Blvd, Los An	geles, CA 90038		ANICA	Les Contractions	
Yes	No	THE POPULATION	MINMEN	12. SECURITY GUARDS		00	300	
13. AUTHORIZED REPRES		MUSIC. MA	RGARET GLASPY	Yes	No	If yes, how n	nany?	
Jay Boileau					1	4. REPRESENTATIVE'S	TELEPHONE NUMBER	
15. REPRESENTATIVE'S A			Will be the second seco					
6000 Santa Monica	Blvd, Los Ange	les, CA 90038						
16. ORGANIZATION'S MAIL	LING ADDRESS (If diffe	erent from #15 above)		the second comments of the second sec	**** m* = 1		The second secon	
17. AUTHORIZED REPRES	ENTATIVE'S SIGNATI	IRE 1	the second second					
		1/1/10				B. DATE SIGNED		
PROPERTY OWNER APPRO	OVAL BY (Name), REC	QUIRED	PHONE NUMBER	PROPERTY ON THE	CICNATURE	08.24.2018		
rogu Kanthian			055 Vac 740	(V la Gr		DATE SIGNED		
LAW ENFORCEMENT APPROVAL BY (Name), IF APPLICABLE			PHONE NUMBER	LAW ENEODOEMENT CIONA		08.24.2018		
DISTRICT OFFICE APPROVAL BY (Name)				1 20	DATE SIGNED			
OTTOL AFFROY	ac bi (Name)			ABC EMPLOYEE SIG	NATURE		ISSUANCE DATE	
The chaus								
The above-named org	anization is herel	by licensed pure	uant to the California D					

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